2002 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2002 8:00 am Secretary of State DOCUMENT # M9600000480 02-27-2002 90086 045 ****50.00 JOE ALLEN MIAMI BEACH LLC Principal Place of Business Mailing Address 1787 PURDY AVENUE 1787 PURDY AVENUE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0683148 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 9200 SOUTH DADELAND BLVD. SUITE 508 MIAMI FL 33156-0000 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES **MGRM** TITI E ☐ Delete Change Addition NAME CRONAUER, RAYMOND P NAME STREET ADDRESS STREET ADDRESS 322 WEST 46TH STREET CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY 10036** TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition NAME RUBEO, MARIO NAME STREET ADDRESS STREET ADDRESS 1787 PURDY AVENUE CITY-ST-ZIP CITY-ST-ZIP <u>Miami Beach FL</u> 33139 TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete [] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ACTORESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP

FILED

MARIO RUBEO Daytime Phone #

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the

limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.